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COMPLETE IF KNOWN

60/499414

1477-002-US

Brown, Alan H.

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DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION

(37 CFR 1.63)

Attorney Docket Number

First Nam d Inv ntor

Application Number

Declaration	Declaration	Filing Date	1	1/17/2003		
Submitted OR with Initial	Submitted after Initial Filing (surcharge	Art Unit				
Filing	(37 CFR 1.16 (e)) required)	Examiner Name				
As the below named inventor, I her	eby declare that:					
My residence, mailing address, and o	itizenship are as stated belov	v next to my name.				
I believe I am the original and first inv	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
Healthcare Information Apparatus and Method						
	(Title of the Inv	vention)				
the specification of which	·	,				
is attached hereto						
OR was filed on (MM/DD/YYYY) 10/20/2003 as United States Application Number or PCT International						
· L						
Application Number 60/499414 and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

PTO/SB/01 (10-01)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer or Bar Co					spondence address below
			323	301	
Name		PATE	NT TRADE	MARK OFFICE	
Address					
City			State		ZIP
Country	Tele	phone			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR	e: [A petition h	as bee	en filed for this unsig	ned inventor
Given Name Alan H. Given Name Family Name or Surname					
Inventor's Signature					11/14/03
Tarzana		CA		USA	US
Residence: City		State		Country	Citizenship
Mailing Address 4500 La Barca Place					
Tarzana		CA		91356	USA
City		State	ZIP		Country
NAME OF SECOND INVENTOR:		A petition ha	s been	filed for this unsign	ed inventor
Given Name Marc G. (first and middle [if any])			Family or Sun	Name Lawson	-
Inventor's Management					Date 11/14/03
San Diego Residence: City		CA State		USA Country	US Citizenship
4204 Bayard Street		1		1	i
Mailing Address	-	<u>r</u>			_
San Diego		CA		92109	US
City	_	State		ZIP	Country
Additional inventors are being named on the	sup	plemental Addition	onal Inve	entor(s) sheet(s) PTO/SB	/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if an	y:			A petition has been fi	iled for th	nis unsigned inventor
Stephen A Given Name		Settlage Family Name or Surname				
Inventor's Signature	\	AT.				Date (1-14-03)
11335 Magnolia Boulevard, #2a	CA State		ı	USA Country		Citizenship
11335 Magnolia Boulevard, #2a Mailing Address						
Mailing Address						
_{city} North Hollywood	CA Sta	\ te	9′ Z	91601 USA ZIP Count		у
Name of Additional Joint Inventor, if any	y:			A petition has been file	ed for thi	s unsigned inventor
Given Name				amily Name r Surname		
Inventor's Signature						Date
Residence: City	Sta	ate	С	ountry		Citizenship
Mailing Address						
Mailing Address						
City	State		Z	ZIP	Country	
Name of Additional Joint Inventor, if any:						
Given Name				ily Name urname		
Inventor's Signature						Date
Residence: City	State			Country		Citizenship
Mailing Address						
Malling Address						
City	Stat	e		ZIP	Co	ountry

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DI	ECLARATION
	on is of the following type: plicable item below)
[] de [] su [] na [] di [] co [] co	riginal. sign. pplemental. tional stage of PCT. visional. ntinuation. ntinuing prosecution (CPA) ntinuation-in-part (C-I-P).
INVENTOR	SHIP IDENTIFICATION
I believe that original, first	post office address and citizenship are as stated below, next to my name. I am the original, first and sole inventor (if only one name is listed below) or an and joint inventor (if plural names are listed below) of the subject matter that is for which a patent is sought on the invention entitled:
	Healthcare Information Apparatus and Method
the specificati	on of which:
(a) (b)	[X] is attached hereto. [] was filed on, as [] Serial No/ or [] and was amended on (if applicable)
(c)	[] was described and claimed in PCT International Application No filed on and as amended under PCT Article 19 on (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.

PRIORITY	CLAIM
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(35 U.S.C. § 119(a)-(d))

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed. (complete (d) or (e))

(d) (e)	[X] no such applications [] such applications ha		i.	
PR	IOR FOREIGN/PCT API (6 MONTHS FOR DE AND ANY PRIORITY	SIGN) PRIOR TO THIS	S APPLICATION	ON
COUNTRY	APPLICATION NO. (OR INDICATE IF PCT)	DATE OF FILING (day, month, year)	PRIORITY UNDER 37	
			[]YES	NO[]
			[] YES	NO[]

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) (34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER	FILING DATE
60/499,414 /	August 29, 2003

Attorney's Docket No. 1477-002-US PATENT APPLICATION

CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. 120

[]The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN PART (C-I-P) APPLICATION.

ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jessica S. Mitchell, Reg. No. 54,317

SEND CORRESPONDENCE TO:

Jessica S. Mitchell, Esq. BKF Jurgensen 800 Silverado Street, 2nd Floor La Jolla, CA 92037 <u>imitchell@bkflaw.com</u>

DIRECT TELEPHONE CALLS TO:

Jessica S. Mitchell, Esq. 858-551-2440 x334 (Office) 858-551-2434 (Fax)

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor: Alan H. Brow	v n
Country of Residence: USA	Date: 11/14/03
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Full name of second joint inventor: Marc G. Lav	, ,
Inventor's signature:	Date: ///14/0ン
Country of Citizenship: US 2	
Country of Residence:	
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San Diego, CA 92109	

Attorney's Docket No. 1477-002-US PATENT APPLICATION

Full name of third joint inventor: Stephen A. Settlage

Inventor's signature: v

Country of Citizenship:

Country of Residence: __

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North Hollywood, CA 91601

[X] This declaration ends with this page.